

10/089073

FILED UNDER 35 U.S.C. 371

PATENT NUMBER and  
ISSUE DATE

## U.S. UTILITY Patent Application

|  |                           |  |                |                                 |                        |
|--|---------------------------|--|----------------|---------------------------------|------------------------|
| APPL NUM<br>10089073   | FILING DATE<br>04/08/2002 | CLASS<br>602   | SUBCLASS<br>41 | GAU<br>3764                     | EXAMINER<br>H. Nielsen |
| <b>**APPLICANTS:</b> Nielsen Brian;  |                           |  |                |                                 |                        |
| <b>**CONTINUING DATA VERIFIED:</b><br>THIS APPLICATION IS A 371 OF PCT/DK00/00557 10/04/2000 |                           |  |                |                                 |                        |
| <h1>Best Available Copy</h1>   |                           |  |                |                                 |                        |
| <b>** FOREIGN APPLICATIONS VERIFIED:</b><br>DENMARK PA 1999 01446 10/07/1999                 |                           |  |                |                                 |                        |
| PG-PUB <input type="checkbox"/> DO NOT PUBLISH <input type="checkbox"/>                      |                           | RESCIND <input type="checkbox"/>   |                |                                 |                        |
| Foreign priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no            |                           | 35 USC 119 conditions met <input type="checkbox"/> yes <input type="checkbox"/> no |                | ATTORNEY DOCKET NO<br>P67699USO |                        |
| Verified and Acknowledged Examiners's initials   |                           |  |                |                                 |                        |
| TITLE : Wound care device  |                           | U.S. DEPT. OF COMM./PAT. & TM-PTO-436L (Rev. 12-94)                                |                |                                 |                        |

|  |           |                           |  |                       |                      |
|--|-----------|---------------------------|--|-----------------------|----------------------|
| <b>NOTICE OF ALLOWANCE MAILED</b>  |           | Assistant Examiner        |  | <b>CLAIMS ALLOWED</b> |                      |
|  |           |                           |  | Total Claims          | Print Claim for O.G. |
| <b>ISSUE FEE</b>   |           | Primary Examiner          |  | <b>DRAWING</b>        |                      |
| Amount Due   | Date Paid |                           |  | Sheets Drwg.          | Figs. Drwg.          |
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>  |           | <b>PREPARED FOR ISSUE</b> |  | Application Examiner  |                      |
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